

Internship/Service Request Form

STUDENT NAME

DATE

TO BE FILLED OUT BY PLACE OF EMPLOYMENT/SERVICE

NAME OF BUSINESS

For Pay Volunteer

NAME OF SUPERVISOR

PHONE No.

DESCRIBE DUTIES

Mon Tues Wed Thurs Fri

START TIME

END TIME

SIGNATURE OF SUPERVISOR

TO BE COMPLETED BY PARENTS and STUDENT

REQUIREMENTS FOR INTERNSHIP:

- (1) Gap time of 90 minutes or more is to be used for service opportunities or an internship.
- (1) Students must speak with the UCHS Principal to confirm and justify the request.
- (2) By signing below, parents waive any and all responsibility for personal injury liability during travel to and from, as well as while on the site.
- (3) The student must be able to be on campus for Chapel and required events.
- (4) By signing below, parents and students acknowledge that this experience shall not count as any form of academic course credit.
- (5) Student must be in—and maintain—good academic standing for the approval of and continuation of interning. (This includes but is not limited to keeping current with all course assignments.)
- (6) Students will be expected to meet with the Principal and provide a written summary of their internship experience.

PARENT'S NAME (PRINTED)

PARENT'S SIGNATURE

STUDENT'S NAME (PRINTED)

STUDENT'S SIGNATURE